

SCHEDULE C
(Form 1040)**Profit or Loss From Business**
(Sole Proprietorship)

OMB No. 1545-0074

2006Attachment
Sequence No. **09**Department of the Treasury
Internal Revenue Service (99)

► Partnerships, joint ventures, etc., must file Form 1065 or 1065-B.
 ► Attach to Form 1040, 1040NR, or 1041. ► See Instructions for Schedule C (Form 1040).

Name of proprietor

VINCENT DE GIOVANNI

Social security number (SSN)

A Principal business or profession, including product or service (see instructions)

CLEANING

B Enter code from instructions

► 812990

C Business name. If no separate business name, leave blank.

CDD ENTERPRISE, LLC

D Employer ID number (EIN), if any**E** Business address (including suite or room no.)
City, town or post office, state, and ZIP code**F** Accounting method: (1) ☒ Cash (2) ☐ Accrual (3) ☐ Other (specify) ►**G** Did you 'materially participate' in the operation of this business during 2006? If 'No,' see instructions for limit on losses. ☒ Yes ☐ No**H** If you started or acquired this business during 2006, check here**Part I Income**

1 Gross receipts or sales. Caution. If this income was reported to you on Form W-2 and the 'Statutory employee' box on that form was checked, see the instructions and check here. <input type="checkbox"/>	1	29,186.
2 Returns and allowances	2	
3 Subtract line 2 from line 1	3	29,186.
4 Cost of goods sold (from line 42 on page 2)	4	3,200.
5 Gross profit. Subtract line 4 from line 3	5	25,986.
6 Other income, including federal and state gasoline or fuel tax credit or refund	6	
7 Gross income. Add lines 5 and 6	7	25,986.

Part II Expenses. Enter expenses for business use of your home **only** on line 30.

8 Advertising	8		18 Office expense	18	
9 Car and truck expenses (see instructions)	9	4,653.	19 Pension and profit-sharing plans	19	
10 Commissions and fees	10		20 Rent or lease (see instructions):		
11 Contract labor (see instructions)	11	3,200.	a Vehicles, machinery, and equipment	20a	
12 Depletion	12		b Other business property	20b	
13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13	3,721.	21 Repairs and maintenance	21	1,925.
14 Employee benefit programs (other than on line 19)	14		22 Supplies (not included in Part III)	22	6,046.
15 Insurance (other than health)	15		23 Taxes and licenses	23	
16 Interest:			24 Travel, meals, and entertainment:		
a Mortgage (paid to banks, etc.)	16a	5,704.	a Travel	24a	
b Other	16b		b Deductible meals and entertainment	24b	
17 Legal & professional services	17		25 Utilities	25	
18 Total expenses before expenses for business use of home. Add lines 8 through 27 in columns	18	25,249.	26 Wages (less employment credits)	26	
29 Tentative profit (loss). Subtract line 28 from line 7	29	737.	27 Other expenses (from line 48 on page 2)	27	
30 Expenses for business use of your home. Attach Form 8829	30				
31 Net profit or (loss). Subtract line 30 from line 29.	31	737.			

• If a profit, enter on both **Form 1040, line 12**, and **Schedule SE, line 2** or on **Form 1040NR, line 13** (statutory employees, see instructions). Estates and trusts, enter on Form 1041, line 3.

• If a loss, you must go to line 32.

32 If you have a loss, check the box that describes your investment in this activity (see instructions).

• If you checked 32a, enter the loss on both **Form 1040, line 12**, and **Schedule SE, line 2**, or on **Form 1040NR, line 13** (statutory employees, see instructions). Estates and trusts, enter on Form 1041, line 3.

32a ☐ All investment is at risk.

• If you checked 32b, you must attach **Form 6198**. Your loss may be limited.

32b ☐ Some investment is not at risk.**BAA** For Paperwork Reduction Act Notice, see Form 1040 instructions.

Schedule C (Form 1040) 2006

FDI20112L 11/03/06

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34 Was there any change in determining quantities, costs, or valuations between opening and closing inventory?
If 'Yes,' attach explanation ☐ Yes ☐ No

42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on page 1, line 4.....	42	3,200
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b If 'Yes,' is the evidence written? ☐ Yes ☐ No

48	Total other expenses. Enter here and on page 1, line 27.....	48
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Part III Cost of Goods Sold (see instructions)

33	Method(s) used to value closing inventory: a <input type="checkbox"/> Cost b <input type="checkbox"/> Lower of cost or market c <input type="checkbox"/> Other (attach explanation)	
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation	<input type="checkbox"/> Yes <input type="checkbox"/> No
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35
36	Purchases less cost of items withdrawn for personal use	36
37	Cost of labor. Do not include any amounts paid to yourself	37
38	Materials and supplies	38
39	Other costs	39
40	Add lines 35 through 39	40
41	Inventory at end of year	41
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on page 1, line 4	42

Part IV Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.

43	When did you place your vehicle in service for business purposes? (month, day, year)	
44	Of the total number of miles you drove your vehicle during 2005, enter the number of miles you used your vehicle for: a Business b Commuting c Other	
45	Do you (or your spouse) have another vehicle available for personal use?	<input type="checkbox"/> Yes <input type="checkbox"/> No
46	Was your vehicle available for personal use during off-duty hours?	<input type="checkbox"/> Yes <input type="checkbox"/> No
47 a	Do you have evidence to support your deduction?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b	If "Yes," is the evidence written?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Part V Other Expenses. List below business expenses not included on lines 8-26 or line 30.

TELEPHONE	1,025.
48 Total other expenses. Enter here and on page 1, line 27	48 1,025.